

Florida Department of State

Division of Corporations

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JULIOR

To:

Division of Corporations
Fax Number : (850)205-0383

From:

Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305)599-0839
Fax Number : (305)716-0346

2006 MAY -2 AM 10:43

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FLORIDA/FOREIGN LIMITED LIABILITY CO.

G.W. MULTISERVICES, LLC

Certificate of Status	0
Certified Copy	1
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DB

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

G.W. MULTISERVICES, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address: Mailing Address:

1701 W. FLAGLER ST. #514

MIAMI, FLORIDA 33135

SECRETARY OF STATE
DIVISION OF CORPORATE
REGISTRATION
2006 MAY -2 AM 10:43

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's
The name and the Florida street address of the registered agent are:

GUILLERMO WILCHES

Name

1701 W. FLAGLER ST. #514

Florida Street address (P.O. Box NOT acceptable)

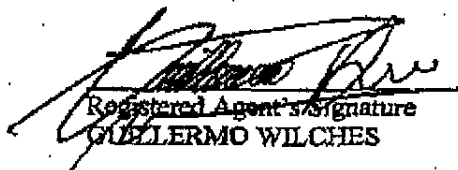
MIAMI, FLORIDA 33135

City, State, and Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F. S..

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SECRETARY OF STATE
DIVISION OF CORPORATE REGISTRATION


Registered Agent's Signature
GUILLERMO WILCHES

Sworn to and subscribed to Before me
This 02 day of MAY 2006


Julio Moran, Notary Public State of Florida



ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

Title:
"MGR" = Manager
"MGRM" = Managing Member

Name and Address:

MGR & MGRM

GUILLERMO WILCHES

1701 W. FLAGLER ST. #514

MIAMI FLORIDA 33135

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SECRETARY OF STATE
DIVISION OF

Signature of a member or an authorized representative of a member.
(In accordance with section 608.408(3), Florida Statutes, the execution
of this document constitutes an affirmation under the penalties of perjury
that the facts stated herein are true.)

GUILLERMO WILCHES
Typed or printed name of signee